	Case 1	L7-03820-5-5WH	DOC 11 Filed (08/15/17 Entered 08/15/17 16:09:0	J5 Pa(je 1 01 46
Fill	in this info	rmation to identify your	case:			
	otor 1	Joseph Delano H				
		First Name	Middle Name	Last Name		
	otor 2 ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ted States B	Sankruptcy Court for the:	EASTERN DISTRICT O	F NORTH CAROLINA		
1	se number nown)	17-03820-5-SWH				k if this is an ided filing
		orm 106Sum	and Liabilities an	nd Certain Statistical Information		12/15
Be a	as complete rmation. Fil r original fo	e and accurate as possik	ole. If two married people es first; then complete th	are filing together, both are equally responsible e information on this form. If you are filing amen the box at the top of this page.	for supplyii	ng correct
					Your a	ssets of what you own
1.	Schedule 1a. Copy I	A/B: Property (Official Fine 55, Total real estate, f	orm 106A/B) rom Schedule A/B		\$	0.00
	1b. Copy I	ine 62, Total personal pro	perty, from Schedule A/B		\$	13,731.00
	1c. Copy li	ine 63, Total of all propert	y on Schedule A/B		\$	13,731.00
Pai	t 2: Sumi	marize Your Liabilities				
						iabilities nt you owe
2.			laims Secured by Property mn A, Amount of claim, at t	(Official Form 106D) the bottom of the last page of Part 1 of Schedule D	. \$	20,648.52
3.			Unsecured Claims (Official 1 (priority unsecured claim	Form 106E/F) s) from line 6e of <i>Schedule E/F</i>	\$	14,785.03
	3b. Copy	the total claims from Part	2 (nonpriority unsecured cl	aims) from line 6j of Schedule E/F	\$	108,986.48
				Your total liabilitie	s \$	144,420.03
Pai	t 3: Sumi	marize Your Income and	Expenses			
4.	Schedule	I: Your Income (Official Fo	orm 106I)	<i>I</i>	\$	5,100.00
5.		J: Your Expenses (Officia monthly expenses from li	,		\$	4,437.00
Pai	t 4: Ansv	ver These Questions for	Administrative and Stati	stical Records		
6.	-	•	er Chapters 7, 11, or 13? on this part of the form. Cl	neck this box and submit this form to the court with y	our other sc	hedules.
7.	■ Yes What kind	d of debt do you have?				

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Debtor 1 Joseph Delano Hyman

Case number (if known) 17-03820-5-SWH

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____3,436.17

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total c	laim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	14,785.03
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	66,705.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	81,490.03

Fill in	this inf	ormation to identify your case a	and this filing:				
Debto	r 1	Joseph Delano Hyman	1				
Dalata	0	First Name	Middle Name	Last Name			
Debto (Spouse	r 2 e, if filing)	First Name	Middle Name	Last Name			
United	l States	Bankruptcy Court for the: EAST	TERN DISTRICT OF NORT	H CAROLINA			
Case	number	17-03820-5-SWH		_			Check if this is an
							amended filing
~ · · ·		1001/5					
_		<u>form 106A/B</u>					
<u>Scr</u>	<u>nedu</u>	ıle A/B: Propert	У				12/15
think it informa	fits best.	y, separately list and describe items . Be as complete and accurate as p nore space is needed, attach a sepa uestion.	ossible. If two married people	e are filing together, both are	equally responsible for	r supplyi	ing correct
Part 1:	Descri	be Each Residence, Building, Land	, or Other Real Estate You Ov	vn or Have an Interest In			
1. Do y	ou own o	or have any legal or equitable intere	est in any residence, building,	land, or similar property?			
■ N	o. Go to I	Part 2.					
□ Y	es. Wher	re is the property?					
Part 2:	Descri	be Your Vehicles					
	s, vans, Io	drives. If you lease a vehicle, also trucks, tractors, sport utility ve	·	xecutory Contracts and Une	expired Leases.		
3.1	Make:	Toyota Camry Sedan 4D LE	Who has an interest in th	e property? Check one	Do not deduct secure the amount of any se	cured cla	ims on Schedule D:
	Model: Year:	2.5L I4 2015	■ Debtor 1 only□ Debtor 2 only		Creditors Who Have	_	
		mate mileage: 41,000	Debtor 1 and Debtor 2 of	only	Current value of the entire property?		rrent value of the rtion you own?
г		formation:	☐ At least one of the debt	ors and another			
	VIN# 4	T1BF1FK4FU088179	Check if this is comme (see instructions)	unity property	\$11,725.0	0	\$11,725.00
Exal N Y Add pag	mples: B	aircraft, motor homes, ATVs and coats, trailers, motors, personal was coats, trailers, motors and the coats, personal and thousehold in the coats, and the	atercraft, fishing vessels, sn wn for all of your entries fr that number here	owmobiles, motorcycle acc	essories entries for	porti	\$11,725.00 ent value of the on you own?
							ot deduct secured as or exemptions.

Official Form 106A/B Schedule A/B: Property page 1

De	ebtor 1	Joseph Dela	no Hyman	Case number (if known)	17-03820-5-SWH
ŝ.		old goods and fulles: Major applian	urnishings ces, furniture, linens, china, kitchenware		
	■ No				
	☐ Yes.	Describe			
7.	Electror Exampl	<i>les:</i> Televisions ar	nd radios; audio, video, stereo, and digital equipment; computers, phones, cameras, media players, games	printers, scanners; music	collections; electronic devices
	□ No	-			
	Yes.	Describe			
			F=		
			Televisions, computers. phones, tablets, stereos, DVI players/video cameras, video game systems, etc.	D	
			Resale value		\$1,500.00
			Troduc Fulus		
3.			figurines; paintings, prints, or other artwork; books, pictures, or oth	ner art objects; stamp, coir	, or baseball card collections;
	■ No	Describe			
	□ 165.	Describe			
9.		ent for sports ar les: Sports, photog musical instru	graphic, exercise, and other hobby equipment; bicycles, pool table	es, golf clubs, skis; canoes	and kayaks; carpentry tools;
	■ No				
	☐ Yes.	Describe			
10.	Firearn Examp		s, shotguns, ammunition, and related equipment		
	■ No				
	\square Yes.	Describe			
	Clothe		othes, furs, leather coats, designer wear, shoes, accessories		
	Yes.	Describe			
			Clothes		****
			Resale value		\$300.00
	□ No		welry, costume jewelry, engagement rings, wedding rings, heirloon	n jewelry, watches, gems,	gold, silver
			Jewelry Resale value		\$50.00
13.		nrm animals			
	■ No	p. 00. 20ge, eate, .	3.135, 1.0.1333		
		Describe			
			d household items you did not already list, including any heal	th aids you did not list	
	■ No				
	☐ Yes.	Give specific info	ormation		
15			of all of your entries from Part 3, including any entries for pag	es you have attached	\$1,850.00

Official Form 106A/B Schedule A/B: Property page 2

Deb	otor 1 Joseph Delano Hym	an		Case number (if known)	17-03820-5-SWH
Part	4: Describe Your Financial Assets	3			
	you own or have any legal or ed		of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	Cash Examples: Money you have in yo No Yes	•	n a safe deposit box, and on hand	when you file your petition	on
			certificates of deposit; shares in creather same institution, list each.	redit unions, brokerage h	ouses, and other similar
	Yes		Institution name:		
	17.1.	Business Checking	Wells Fargo		\$0.00
	17.2.	Checking	Wells Fargo		\$0.00
	17.3.	Savings	Wells Fargo		\$0.00
	17.4.	checking	SECU		\$156.00
19. I	- 100	nt accounts with brokerage Institution or issuer name: nterests in incorporated	, , , , , , , , , , , , , , , , , , ,	s, including an interes	t in an LLC, partnership, and
	•	ne of entity:		% of ownership:	
	Hyr	man Transportation		%	\$0.00
•	Negotiable instruments include p Non-negotiable instruments are t ■ No □ Yes. Give specific information a	ersonal checks, cashiers' hose you cannot transfer	e and non-negotiable instrument checks, promissory notes, and mo to someone by signing or deliverin	oney orders.	
_	Retirement or pension accounts Examples: Interests in IRA, ERIS No		thrift savings accounts, or other p	ension or profit-sharing	plans
	Yes. List each account separate Type o	ely. of account:	Institution name:		
	Security deposits and prepaym Your share of all unused deposits Examples: Agreements with land No	s you have made so that y	ou may continue service or use frutilities (electric, gas, water), telec	om a company communications compan	ies, or others
	■ 110 ☑ Yes		Institution name or individual:		

Official Form 106A/B Schedule A/B: Property page 3

☐ Yes.

23.	Annuities (A contract ■ No	ct for a periodic payment of money to you, either for life	e or for a number of years)	
	☐ Yes	Issuer name and description.		
	26 U.S.C. §§ 530(b)(1	eation IRA, in an account in a qualified ABLE progra 1), 529A(b), and 529(b)(1).	am, or under a qualified state tuition prog	ram.
	■ No □ Yes	Institution name and description. Separately file the r	records of any interests.11 U.S.C. § 521(c):	
25.	_ ` `	r future interests in property (other than anything li	isted in line 1), and rights or powers exerc	sisable for your benefit
	■ No□ Yes. Give specific	c information about them		
26.	Examples: Internet of	s, trademarks, trade secrets, and other intellectual domain names, websites, proceeds from royalties and		
	■ No□ Yes. Give specific	c information about them		
27.		es, and other general intangibles		
	Examples: Building ■ No	permits, exclusive licenses, cooperative association he	oldings, liquor licenses, professional licenses	
	☐ Yes. Give specific	c information about them		
M	oney or property owe	ed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to	to you		
	■ No No Ves Give specific	information about them, including whether you already	v filed the returns and the tax years	
	_ rec. cive opecinio	moments about them, motioning mounts you understand	, mod the retaine and the tax years	
29.	_ '	e or lump sum alimony, spousal support, child support,	maintenance, divorce settlement, property se	ettlement
	■ No □ Yes. Give specific	information		
30.		neone owes you wages, disability insurance payments, disability benefit ; unpaid loans you made to someone else	s, sick pay, vacation pay, workers' compens	ation, Social Security
	■ No			
	☐ Yes. Give specific	c information		
	Interests in insuran Examples: Health, d ■ No	nce policies disability, or life insurance; health savings account (HS.	A); credit, homeowner's, or renter's insurance	е
	_	surance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
32.		perty that is due you from someone who has died iciary of a living trust, expect proceeds from a life insur	rance policy, or are currently entitled to receive	
	■ No			
	☐ Yes. Give specific	c information		
		d parties, whether or not you have filed a lawsuit or is, employment disputes, insurance claims, or rights to		
	■ N0 Nes Describe eac	ch claim		

Official Form 106A/B Schedule A/B: Property page 4

Deb	tor 1 Joseph Delano Hyman		Case number (if known)	17-03820-5-SWH
34. (Other contingent and unliquidated claims of every nature, inclu	uding counterclaims o	of the debtor and rights to	set off claims
	No			
	Yes. Describe each claim			
35. <i>I</i>	Any financial assets you did not already list			
	No			
	Yes. Give specific information			
36.	Add the dollar value of all of your entries from Part 4, includin for Part 4. Write that number here			\$156.00
Part	5: Describe Any Business-Related Property You Own or Have an Inter	rest In. List any real esta	ite in Part 1.	
37. D	o you own or have any legal or equitable interest in any business-relat	ed property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
Part	6: Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	ı Own or Have an Interes	st In.	
	in you own or have an interest in rainiana, not thin 1 art 1.			
	Do you own or have any legal or equitable interest in any farm- —	or commercial fishin	g-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part	7: Describe All Property You Own or Have an Interest in That You	u Did Not List Above		
	Do you have other property of any kind you did not already list Examples: Season tickets, country club membership	?		
	No			
L	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
	•		L	
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$11,725.00		<u> </u>
57.	Part 3: Total personal and household items, line 15	\$1,850.00		
58.	Part 4: Total financial assets, line 36	\$156.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$13,731.00	Copy personal property to	stal \$13,731.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$13,731.00

Official Form 106A/B Schedule A/B: Property page 5

Case 17-03820-5-SWH Doc 11 Filed 08/15/17 Entered 08/15/17 16:09:05 Page 8 of 46

Rev. 3/2016

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NORTH CAROLINA

IN THE MATTER OF: **Joseph Delano Hyman** Debtor(s). CASE NUMBER: **17-03820-5-SWH**

SCHEDULE C-1 - PROPERTY CLAIMED AS EXEMPT

I, <u>Joseph Delano Hyman</u>, claim the following property as exempt pursuant to 11 U.S.C. § 522 and the laws of the State of North Carolina, and nonbankruptcy Federal law: (Attach additional sheets if necessary).

1. NCGS 1C-1601(a)(1) (NC Const., Article X, Section 2) REAL OR PERSONAL PROPERTY USED AS A RESIDENCE OR BURIAL PLOT (The exemption is not to exceed \$35,000; however, an unmarried debtor who is 65 years of age or older is entitled to retain an aggregate interest in the property not to exceed \$60,000 in value so long as the property was previously owned by the debtor as a tenant by the entireties or as a joint tenant with rights of survivorship and the former co-owner of the property is deceased, in which case the debtor must specify his/her age and the name of the former co-owner, if a child use initials only, of the property below).

Description of Property and Address	Market <u>Value</u>	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Mortgage Holder or Lien Holder	Amount of Mortgage <u>or Lien</u>	Net <u>Value</u>	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(1)
-NONE-						
Debtor's Age: Name of former co-owne	er:					

VALUE OF REAL ESTATE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(1): \$ 0.00

2. NCGS 1C-1601(a)(3) MOTOR VEHICLE (The exemption in one vehicle is not to exceed \$3,500).

		Owner (D1)Debtor 1				
Model, Year Style of Auto	Market <u>Value</u>	(D2)Debtor 2	<u>Lien Holder</u>	Amount of <u>Lien</u>	Net <u>Value</u>	1
-NONE-						

VALUE OF MOTOR VEHICLE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(3): \$ 0.00

3. NCGS 1C-1601(a)(4) (NC Const., Article X, Section 1) PERSONAL OR HOUSEHOLD GOODS (The debtor's aggregate interest is not to exceed \$5,000 plus \$1,000 for each dependent of the debtor, not to exceed \$4,000 total for dependents). The number of dependents for exemption purposes is 3.

Description of Property	Market <u>Value</u>	(02)00000 2	Lien <u>Holder</u>	Amount of Lien	Net <u>Value</u>	Claimed as Exempt Pursuant to NCGS 1C-1601(a)(4)
Clothes Resale value	300.00				300.00	300.00
Jewelry Resale value	50.00				50.00	50.00
Televisions, computers. phones, tablets, stereos, DVD players/video cameras, video						
game systems, etc. Resale value	1,500.00				1,500.00	1,500.00

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(4): \$ 1,850.00

4. NCGS 1C-1601(a)(5) TOOLS OF TRADE (The debtor's aggregate interest is not to exceed \$2,000 in value).

Description	Market <u>Value</u>	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Lien <u>Holder</u>	Amount of <u>Lien</u>	Net <u>Value</u>	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(5)
-NONE-						

Schedule C-1 - Property Claimed as Exempt - 3/2016

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(5): \$ 0.00

5. NCGS 1C-1601(a)(6) LIFE INSURANCE (NC Const., Article X, Section 5).

Description\Insured\Last Four Digits of Policy Number\Beneficiary(if child, initials only)	Cash Value
-NONE-	

6. NCGS 1C-1601(a)(7) PROFESSIONALLY PRESCRIBED HEALTH AIDS (For Debtor or Debtor's Dependents, no limit on value).

<u>Description</u>	
-NONE-	

7. NCGS 1C-1601(a)(8) COMPENSATION FOR PERSONAL INJURY, INCLUDING COMPENSATION FROM PRIVATE DISABILITY POLICIES OR ANNUITIES, OR COMPENSATION FOR DEATH OF A PERSON UPON WHOM THE DEBTOR WAS DEPENDENT FOR SUPPORT. COMPENSATION NOT EXEMPT FROM RELATED LEGAL, HEALTH OR FUNERAL EXPENSE.

Description AND Source of Compensation, Including Name (If child, initials only) & Last Four Digits of Account Number of any Disability Policy/Annuity -NONE-

8. NCGS 1C-1601(a)(2) ANY PROPERTY (Debtor's aggregate interest in any property is not to exceed \$5,000 in value of any unused exemption amount to which the debtor is entitled under NCGS 1C-1601(a)(1)).

Description of Property and Address	Market <u>Value</u>	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Lien <u>Holder</u>	Amount <u>of Lien</u>	Net <u>Value</u>	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(2)
checking: SECU	156.00				156.00	156.00

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(2): \$ 156.00

9. NCGS 1C-1601(a)(9) and 11 U.S.C. § 522 INDIVIDUAL RETIREMENT PLANS & RETIREMENT FUNDS, as defined in the Internal Revenue Code, and any plan treated in the same manner as an individual retirement plan, including individual retirement accounts and Roth retirement accounts as described in §§ 408(a) and 408A of the Internal Revenue Code, individual retirement annuities as described in § 408(b) of the Internal Revenue Code, accounts established as part of a trust described in § 408(c) of the Internal Revenue Code, and funds in an account exempt from taxation under § 401, 403, 408, 408A, 414, 457, or 510(a) of the Internal Revenue Code. For purposes of this subdivision, "Internal Revenue Code" means Code as defined in G.S. 105-228.90.

Type of Account\Location of Account\Last Four Digits of Account Number

-NONE-

10. NCGS 1C-1601(a)(10) FUNDS IN A COLLEGE SAVINGS PLAN, as qualified under § 529 of the Internal Revenue Code, and that are not otherwise excluded from the estate pursuant to 11 U.S.C. §§ 541(b)(5)-(6), (e), not to exceed a cumulative limit of \$25,000. If funds were placed in a college savings plan within the 12 months prior to filing, the contributions must have been made in the ordinary course of the debtor's financial affairs and must have been consistent with the debtor's past pattern of contributions. The exemption applies to funds for a child of the debtor that will actually be used for the child's college or university expenses.

College Savings Plan\Last Four Digits of Account Number\Value\Initials of Child Beneficiary

-NONE-

11. NCGS 1C-1601(a)(11) RETIREMENT BENEFITS UNDER THE RETIREMENT PLANS OF OTHER STATES AND GOVERNMENTAL UNITS OF OTHER STATES (The debtor's interest is exempt only to the extent that these benefits are exempt under the laws of the state or governmental unit under which the benefit plan is established).

Name of Retirement Plan\State Governmental Unit\Last Four Digits of Identifying Number

-NONE-

12. NCGS 1C-1601(a)(12) ALIMONY, SUPPORT, SEPARATE MAINTENANCE, AND CHILD SUPPORT PAYMENTS OR FUNDS THAT HAVE BEEN RECEIVED OR TO WHICH THE DEBTOR IS ENTITLED (The debtor's interest is exempt to the extent the payments or funds are reasonably necessary for the support of the debtor or any dependent of the debtor).

Type of Support\Amount\Location of Funds

-NONE-

Case 17-03820-5-SWH Doc 11 Filed 08/15/17 Entered 08/15/17 16:09:05 Page 10 of

13. TENANCY BY THE ENTIRETY. The following property is claimed as exempt pursuant to 11 U.S.C. § 522 and the law of the State of North Carolina pertaining to property held as tenants by the entirety.

Description of	Market	Lien	Amount	Net
Property and Address	<u>Value</u>	<u>Holder</u>	of Lien	<u>Value</u>
-NONE-				

VALUE CLAIMED AS EXEMPT: \$ 0.00

14. NORTH CAROLINA PENSION FUND EXEMPTIONS

NONE-	
15. OTHER EXEMPTIONS CLAIMED UNDER LAWS OF THE STATE OF NORTH CAROLINA	
NONE-	
16. FEDERAL PENSION FUND EXEMPTIONS	
TO TESTIVE FERGUS ON SING EXEMINATES	

- 18. RECENT PURCHASES
- (a). List tangible personal property purchased by the debtor within ninety (90) days of the filing of the bankruptcy petition.

Description	Market <u>Value</u>	Amount <u>of Lien</u>	Net <u>Value</u>
-NONE-			

(b). List any tangible personal property from 18(a) that is directly traceable to the liquidation or conversion of property that may be exempt and that was not acquired by transferring or using additional property.

Description of Replacement Property	Description of Property Liquidated or Converted that May Be Exempt

- 19. The debtor's property is subject to the following claims:
- a. Of the United States or its agencies as provided by federal law.
- b. Of the State of North Carolina or its subdivisions for taxes, appearance bonds or fiduciary bonds;
- c. Of a lien by a laborer for work done and performed for the person claiming the exemption, but only as to the specific property affected.
- d. Of a lien by a mechanic for work done on the premises, but only as to the specific property affected.
- e. For payment of obligations contracted for the purchase of specific real property affected.
- f. For contractual security interests in specific property affected; provided, that the exemptions shall apply to the debtor's household goods notwithstanding any contract for a nonpossessory, nonpurchase money security interest in any such goods.
- g. For statutory liens, on the specific property affected, other than judicial liens.
- h. For child support, alimony or distributive award order pursuant to Chapter 50 of the General Statutes of North Carolina.
- i. For criminal restitution orders docketed as civil judgments pursuant to G.S. 15A-1340.38.
- j. Debts of a kind specified in 11 U.S.C. § 523(a)(1) (certain taxes), (5) (domestic support obligations).
- k. Debts of a kind specified in 11 U.S.C. § 522(c).

	Nature of	Amount of	Description of	Value	Net
Claimant	<u>Claim</u>	<u>Claim</u>	<u>Property</u>	of Property	<u>Value</u>
			2015 Toyota Camry		
			Sedan 4D LE 2.5L I4		
			41,000 miles		
			VIN#		
Ally Financial	Agreement	20,648.52	4T1BF1FK4FU088179	11,725.00	0.00

Case 17-03820-5-SWH Doc 11 Filed 08/15/17 Entered 08/15/17 16:09:05 Page 11 of

None of the property listed in paragraph 18(a), except qualified replacement property under 18(b), has been included in this claim of exemptions.

None of the claims listed in paragraph 19 is subject to this claim of exemptions.

I declare that to the extent any exemptions I have claimed appear on its face to exceed the amount allowed by the applicable statute, I claim only the maximum amount allowed by statute.

UNSWORN DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF INDIVIDUAL TO SCHEDULE C-1 - PROPERTY CLAIMED AS EXEMPT

	I,	Josep	oh Delan	o Hyman		, declare und	ler penalty o	f perjury tha	it I have read	d the foregoin	ng Schedule	C-1 - Prop	erty Claimed	as
Exempt,	consi	isting of	4 sheets,	and that th	ney a	are true and c	correct to the	best of my	knowledge,	information a	and belief.			

Executed on: August 15, 2017 /s/ Joseph Delano Hyman

Joseph Delano Hyman

Debtor

Case 17-03820-5-SWH Doc 11 Filed 08/15/17 Entered 08/15/17 16:09:05 Page 12 of

Ouse 1	.7 00020 3 3 4	46	Litter	ca 00/15/11		.gc 12 01
Fill in this inform	nation to identify you	ur case:				
Debtor 1	Joseph Delano	Hvman				
	First Name	Middle Name Last Na	me			
Debtor 2 (Spouse if, filing)	First Name	Middle Name Last Na				
-						
United States Bar	nkruptcy Court for the	EASTERN DISTRICT OF NORTH CAR	ROLINA		-	
Case number 1	17-03820-5-SWH					
(if known)						k if this is an
					amen	ded filing
Official Form	n 106D					
		S Who Have Claims Secu	ired h	v Propert	V	12/15
				.		
		If two married people are filing together, both out, number the entries, and attach it to this fo				
1. Do any creditors	have claims secured b	y your property?				
☐ No. Check	this box and submit t	his form to the court with your other schedul	les. You ha	ave nothing else t	to report on this form.	
Yes. Fill in	all of the information	below.				
Part 1: List Al	I Secured Claims					
		more than one secured claim, list the creditor sepa	arately (Column A	Column B	Column C
for each claim. If me	ore than one creditor has	s a particular claim, list the other creditors in Part 2 ical order according to the creditor's name.	2. As A	Amount of claim On not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Ally Finan	cial	Describe the property that secures the claim		\$20,648.52	\$11,725.00	\$8,923.52
Creditor's Name		2015 Toyota Camry Sedan 4D LE 2.5L I4 41,000 miles				
	aging Agent	VIN# 4T1BF1FK4FU088179 As of the date you file, the claim is: Check all t	that			
PO Box 13	30424 MN 55113-0004	apply.	. rot			
		Contingent				
Number, Street,	City, State & Zip Code	☐ Unliquidated☐ Disputed				
Who owes the de	bt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mortgage	or secured			
Debtor 2 only		car loan)				
Debtor 1 and De	ebtor 2 only	☐ Statutory lien (such as tax lien, mechanic's li	ien)			
☐ At least one of the	ne debtors and another	☐ Judgment lien from a lawsuit				
Check if this cla community del		Other (including a right to offset)				
Date debt was incu	urred July 2015	Last 4 digits of account number 1	509			
Add the dollar va	ilue of vour entries in C	Column A on this page. Write that number here:		\$20,64	18 52	
		the dollar value totals from all pages.		\$20,0		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

\$20,648.52

Write that number here:

Case 17-03820-5-SWH Doc 11 Filed 08/15/17 Entered 08/15/17 16:09:05 Page 13 of

					46	.0.00.00/_0/		,
Fill in t	this informa	tion to identify your c	ase:					
Debtor	· 1	Joseph Delano Hy	man					
		First Name		Name	Last Name			
Debtor (Spouse		First Name	Middle	e Name	Last Name			
United	States Bank	ruptcy Court for the:	EASTERN	N DISTRICT C	F NORTH CAROLINA	Α		
Case n	number 17	-03820-5-SWH						
(if known	n)							if this is an ed filing
Offici	ial Form	106E/F						
Sche	dule E/I	F: Creditors W	ho Hav	e Unsecu	red Claims			12/15
Part 1: 1. Do 2. List ider	any creditors No. Go to Pari Yes. t all of your p ntify what type	of Your PRIORITY Unstance priority unsecured t 2. riority unsecured claims of claim it is. If a claim has	I claims aga If a creditor both priority	inst you? has more than y and nonpriority	amounts, list that claim	aim, list the creditor separat here and show both priority	and nonpriority amoun	ts. As much as
Par	rt 1. If more tha	claims in alphabetical orde an one creditor holds a pai on of each type of claim, s	ticular claim,	list the other cre	editors in Part 3.	nan two priority unsecured o	laims, fill out the Contil	nuation Page of
(F0	л ап ехріапаці	on or each type or claim, s	ee me msnud	CHOIS FOI THIS FOI	III III tile ilistraction book	Total claim	Priority amount	Nonpriority amount
2.1		Revenue Service		Last 4 digits of	f account number	\$12,285.03	\$7,225.83	\$5,059.20
		ed Insolvency		When was the	debt incurred?		_	
				As of the date	you file, the claim is: C	heck all that apply		
W	/ho incurred t	he debt? Check one.		☐ Contingent				
	Debtor 1 only	у		☐ Unliquidated	d			
	Debtor 2 only	y		☐ Disputed				
	Debtor 1 and	Debtor 2 only		Type of PRIOR	ITY unsecured claim:			
	At least one	of the debtors and anothe	r	☐ Domestic su	upport obligations			
	Check if this	s claim is for a commun	ity debt	■ Taxes and o	certain other debts you ov	ve the government		
Is	the claim sul	bject to offset?		☐ Claims for d	eath or personal injury w	hile you were intoxicated		
	No			Other. Spec	ify			
	Yes				Taxes			

Case 17-03820-5-SWH Doc 11 Filed 08/15/17 Entered 08/15/17 16:09:05 Page 14 of

Debtor 1 Joseph Delano Hyman	Case number (if know)	17-03820-5-SWH	
2.2 Kimberlee Hyman Priority Creditor's Name	Last 4 digits of account number \$0.00	\$0.00	\$0.00
79 Fogleglen Drive	When was the debt incurred?	_	
Clayton, NC 27520 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	☐ Contingent		
Debtor 1 only	☐ Unliquidated		
Debtor 2 only	☐ Disputed		
☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:		
☐ At least one of the debtors and another	■ Domestic support obligations		
\square Check if this claim is for a community debt	☐ Taxes and certain other debts you owe the government		
Is the claim subject to offset?	\square Claims for death or personal injury while you were intoxicated		
No	Other. Specify		
☐ Yes	\$780.00/month \$19,110 arrears		
2.3 Lisa Savoy Young	Last 4 digits of account number \$0.00	\$0.00	\$0.00
Priority Creditor's Name 12105 Bending Branch Road Charlotte, NC 28227	When was the debt incurred?	_	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	☐ Contingent		
Debtor 1 only	☐ Unliquidated		
☐ Debtor 2 only	☐ Disputed		
☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:		
\square At least one of the debtors and another	■ Domestic support obligations		
\square Check if this claim is for a community debt	\square Taxes and certain other debts you owe the government		
Is the claim subject to offset?	☐ Claims for death or personal injury while you were intoxicated		
■ No □ Yes	Other. Specify \$555/month		
Li Yes	\$19,258 arrears		
NC Department of Revenue	Last 4 digits of account number \$2,500.00	\$598.00 \$1,9	02.00
Priority Creditor's Name Office Serv. Div., Bankruptcy Unit	When was the debt incurred?		
Post Office Box 1168		_	
Raleigh., NC 27602-1168 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	☐ Contingent		
Debtor 1 only	☐ Unliquidated		
Debtor 2 only	☐ Disputed		
☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:		
☐ At least one of the debtors and another	☐ Domestic support obligations		
☐ Check if this claim is for a community debt	■ Taxes and certain other debts you owe the government		
Is the claim subject to offset?	\square Claims for death or personal injury while you were intoxicated		
■ No	Other. Specify		
☐ Yes	Taxes		
Part 2: List All of Your NONPRIORITY Unsec	ured Claims		
3. Do any creditors have nonpriority unsecured clai	ms against you?		
\square No. You have nothing to report in this part. Subm	t this form to the court with your other schedules.		
■ Yes.			

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of

Debtor 1 Joseph Delano Hyman

Case number (if know)

17-03820-5-SWH

Pa	ırt 2.			
				Total claim
4.1	Best Buy/CBNA	Last 4 digits of account number	3818	\$670.00
	Nonpriority Creditor's Name Attn: Managing Agent/Bankruptcy 50 Northwest Point Road Elk Grove Village, IL 60007	When was the debt incurred?	July 2014	-
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit card		-
4.2	Capital One	Last 4 digits of account number	4156	\$696.00
	Nonpriority Creditor's Name Attn: Managing Agent/Bankruptcy	When was the debt incurred?	March 2013	_
	PO Box 30285 Salt Lake City, UT 84130-0285			
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Other. Specify Credit card		-
4.3	Carolina Quick Care	Last 4 digits of account number	7985	\$169.00
	Nonpriority Creditor's Name Attn: Managing Agent/Bankruptcy	When was the debt incurred?	August 2014	
	391 George W Liles Parkway Concord, NC 28027			-
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	Obligations arising out of a separe report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Other. Specify Medical ser	vices	
				-

Case 17-03820-5-SWH Doc 11 Filed 08/15/17 Entered 08/15/17 16:09:05 Page 16 of

Debtor	1 Joseph Delano Hyman		Case number (if know) 17-0382	20-5-SWH
4.4	Credit First N.A.	Last 4 digits of account number	9827	\$1,614.00
	Nonpriority Creditor's Name Attn: Managing Agent Post Office Box 818011 Cleveland, OH 44181-8011	When was the debt incurred?	August 2014	_
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community debt		aration agreement or divorce that you did	not
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharir	a plane, and other similar debte	
	■ No	·	•	
	Yes	Other. Specify Credit card		
4.5	Credit One Bank Nonpriority Creditor's Name	Last 4 digits of account number	2425	\$1,234.00
	Attn: Managing Agent/Bankruptcy Post Office Box 98873	When was the debt incurred?	April 2016	
	Las Vegas, NV 89193-8873 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did	not
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Other. Specify Credit card		
4.6	Discover Bank Discover Products	Last 4 digits of account number	9760	\$1,458.48
	Nonpriority Creditor's Name Attn: Managing Agent/Bankruptcy Post Office Box 3025	When was the debt incurred?	August 2014	
	New Albany, OH 43054 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	\square Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did	not
	Is the claim subject to offset?	report as priority claims	·	
	■ No	Debts to pension or profit-sharir	g plans, and other similar debts	
	Yes	■ Other. Specify Credit card		

Case 17-03820-5-SWH Doc 11 Filed 08/15/17 Entered 08/15/17 16:09:05 Debtor 1 Joseph Delano Hyman Case number (if know) 17-03820-5-SWH Last 4 digits of account number 4.7 \$8,000.00 **Headway Capital LLC** Nonpriority Creditor's Name Attn: Managing Agent/Bankruptcy When was the debt incurred? 175 West Jackson Boulevard Ste 1000 Chicago, IL 60604 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Loan 4.8 Kabbage Last 4 digits of account number \$4,300.00 Nonpriority Creditor's Name Attn: Managing Agent/Bankruptcy When was the debt incurred? 730 Peachtree Street Suite 350 Atlanta, GA 30308 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not debt report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Loan 4.9 Kohl's/Capital One Last 4 digits of account number 6015 \$536.00 Nonpriority Creditor's Name Attn: Managing Agent/Bankruptcy When was the debt incurred? August 2014 PO Box 3043 Milwaukee, WI 53201-3043 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent

Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Account

Case 17-03820-5-SWH Doc 11 Filed 08/15/17 Entered 08/15/17 16:09:05 Page 18 of

Debtor 1 Joseph Delano Hyman Case number (if know) 17-03820-5-SWH 4.1 LabCorp \$200.00 Last 4 digits of account number 0 Nonpriority Creditor's Name **Attn: Managing Agent** When was the debt incurred? PO Box 2100 **Burlington, NC 27216-2100** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medical services 4.1 One Main Financial 0112 \$4,293.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Managing Agent/Bankruptcy When was the debt incurred? **April 2015** PO Box 6042 Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Loan 4.1 Quick Bridge Funding 9354 \$1,710.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Managing Agent/ Bankrutpcy When was the debt incurred? May 2015 410 Exchange #150 Irvine, CA 92602 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Loan

Case 17-03820-5-SWH Doc 11 Filed 08/15/17 Entered 08/15/17 16:09:05 Page 19 of

Debt	or 1 Joseph Delano Hyman		Case number (if know)	17-03820-5-SWH	
4.1 3	SYNCB/Discount Tire	Last 4 digits of account number	2055		\$333.00
	Nonpriority Creditor's Name Attn: Managing Agent/Bankruptcy PO Box 960061	When was the debt incurred?	April 2014		
	Orlando, FL 32896-0061 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	· ·	•	
	No	☐ Debts to pension or profit-sharing	ng plans, and other similar de	ebts	
	Yes	Other. Specify Credit card			
4.1	SYNCB/Lowe's	Last 4 digits of account number	4444		\$232.00
4	Nonpriority Creditor's Name Attn: Managing Agent/Bankruptcy	When was the debt incurred?	August 2014		
	PO Box 965060 Orlando, FL 32896-5060 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce	that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar de	ebts	
	☐ Yes	Other. Specify Credit card			
4.1	SYNCB/Pep Boys		1536		\$488.00
5	Nonpriority Creditor's Name	Last 4 digits of account number	1330		Ψ400.00
	Attn: Managing Agent/Bankruptcy PO Box 965018	When was the debt incurred?	August 2014		
	Orlando, FL 32896 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	Пол			
	Debtor 2 only	☐ Contingent			
	Debtor 2 only Debtor 1 and Debtor 2 only	☐ Unliquidated			
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt	☐ Obligations arising out of a sepa	aration agreement or divorce	that you did not	
	Is the claim subject to offset?	report as priority claims			
	No	Debts to pension or profit-sharing	ng plans, and other similar de	ebts	
	☐ Yes	Other Specify Credit card			

Case 17-03820-5-SWH Doc 11 Filed 08/15/17 Entered 08/15/17 16:09:05 Page 20 of

Debto	Joseph Delano Hyman		Case number (if know)	17-03820-5-	SWH
4.1	SYNCB/Sam's Club Discover	Last 4 digits of account number	3220		\$724.00
<u> </u>	Nonpriority Creditor's Name Attn: Managing Agent/Bankruptcy PO Box 965060	When was the debt incurred?	August 2014		
	Orlando, FL 32896-5060 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce	that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar de	∌bts	
	Yes	Other. Specify Account			
4.1 7	SYNCB/Walmart	Last 4 digits of account number			\$1,200.00
	Nonpriority Creditor's Name Attn: Managing Agent/Bankruptcy PO Box 965024	When was the debt incurred?			
	Orlando, FL 32896 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	_				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:		
	At least one of the debtors and another	☐ Student loans	a olalli.		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce	that you did not	
	No	Debts to pension or profit-sharing	na plane, and other similar de	ahte	
				ເນເວ	
	Yes	■ Other. Specify Credit card			
4.1 8	US Department of Education Nonpriority Creditor's Name	Last 4 digits of account number	8581	-	\$57,797.00
	Direct Loans Service Center P. O. Box 5606 Greenville, TX 75403-5609	When was the debt incurred?	April 2012		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	_ ′	☐ Unliquidated			
	Debtor 2 only	☐ Disputed			
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	d claim:		
	At least one of the debtors and another	Student loans			
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a sepa	aration agreement or divorce	that you did not	
	Is the claim subject to offset?	report as priority claims		, y = 2. 2. 2. 2. 1. 2. 1. 2. 1. 2. 1. 2. 1. 2. 1. 2. 1. 2. 1. 2. 1. 2. 1. 2. 1. 2. 1. 2. 1. 2. 1. 2. 1. 2	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar de	ebts	
	☐ Yes	☐ Other. Specify			

Student loan

Case 17-03820-5-SWH Doc 11 Filed 08/15/17 Entered 08/15/17 16:09:05 Page 21 of

Debtor 1 Joseph Delano Hyman Case number (if know) 17-03820-5-SWH 4.1 **US Department of Education** 9581 \$8,908.00 Last 4 digits of account number 9 Nonpriority Creditor's Name **Direct Loans Service Center** When was the debt incurred? **July 2003** P. O. Box 5606 Greenville, TX 75403-5609 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Student loan 4.2 Verizon Wireless Bankruptcy Admin 9460 \$1,736.00 Last 4 digits of account number 0 Nonpriority Creditor's Name September 2009 Attn: Managing Agent/Bankruptcy When was the debt incurred? 500 Technology Drive #550 Saint Charles, MO 63304 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Account 4.2 \$688.00 Webbank/Fingerhut 2697 Last 4 digits of account number Nonpriority Creditor's Name Attn: Managing Agent/Bankruptcy When was the debt incurred? March 2013 6250 Ridgewood Road Saint Cloud, MN 56303 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Account

Debtor 1 Joseph Delano Hyman

Case number (if know)

17-03820-5-SWH

WEX Bankn	Last 4 digits of account number	\$12,000.
Nonpriority Creditor's Name		
Attn: Managing agent	When was the debt incurred?	
Post Office Box 639		
Portland, ME 04104		
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
ls the claim subject to offset?	report as priority claims	
No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Credit card	

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total				
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 14,785.03
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 14,785.03
	6f.	Student loans	6f.	\$ Total Claim 66,705.00
Total claims				 · · · · · · · · · · · · · · · · · · ·
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 42,281.48
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 108,986.48

Fill in this infor	mation to identify your	case:		
Debtor 1	Joseph Delano H	yman		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F NORTH CAROLINA	
Case number	17-03820-5-SWH			
(if known)				Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Р	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Fitness Connections 4700 Emperor Boulevard Durham, NC 27703	Gym membership. Assume.
2.2	Pro Transport & Leasing, Inc. 5520 32nd Avenue S Grand Forks, ND 58201	2017 Kenworth
2.3	Sirius Satellite Radio Attn: Managing Agent PO Box 33174 Detroit, MI 48232-5280	Sirius XM contract. Assume.
2.4	Sprint Attn: Managing Agent/Bankruptcy 6200 Sprint Parkway Overland Park, KS 66251-4300	Cell phone contract. Assume.

Case 17-03820-5-SWH Doc 11 Filed 08/15/17 Entered 08/15/17 16:09:05 Page 24 of

			46		-
Fill in this	s information to identify your	case:	10		
Debtor 1	Joseph Delano H				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ing) First Name	Middle Name	Last Name		
	ates Bankruptcy Court for the:	EASTERN DISTRICT (OF NORTH CAROLINA		
Cooo num	hor 47 02020 E CMIII				
Case num (if known)	17-03820-5-SWH				☐ Check if this is an amended filing
Officia	l Form 106H				
	dule H: Your Cod	lehtors			12/15
<u> </u>	dale III. Todi ooc	icbtol 3			12/13
1. Do	e and case number (if known you have any codebtors? (If	,		as a codebtor.	
■ No □ Yes					
	hin the last 8 years, have yo na, California, Idaho, Louisiana				ty states and territories include
= N.	On to Page 0				
	. Go to line 3. s. Did your spouse, former spo	ouse, or legal equivalent liv	e with you at the time?		
	. , , ,	,			
in line Form	e 2 again as a codebtor only	if that person is a guarar	ntor or cosigner. Make	sure you have listed t	ng with you. List the person shown the creditor on Schedule D (Official , Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and 2	ZIP Code		Column 2: The cr Check all schedul	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D. lir	ne
	Name			☐ Schedule E/F,	
				☐ Schedule G, lir	ne
-	Number Street City	State	ZIP Code	_	
3.2				□ Cabadula D li	
	Name			_ ☐ Schedule D, lir ☐ Schedule E/F,	
				☐ Schedule G, lin	
-	Number Street			_	
	City	State	ZIP Code		

Schedule H: Your Codebtors

Fill	in this information to identify your ca	ase:				1				
	otor 1 Joseph Dela									
	otor 2				_					
Uni	ted States Bankruptcy Court for the	EASTERN DISTRICT	OF NORTH CAROL	INA	_					
	te number 17-03820-5-SWH						ck if this is an amende a supplem	ed filing	ring postpetition	chapter
<u> </u>	fficial Form 1061								following date:	
	fficial Form 106l chedule I: Your Inc					N	/M / DD/ \	/YYY		12/15
Be a sup spo atta	es complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form.	sible. If two married peo are married and not filir r spouse is not filing wi	ng jointly, and your sith you, do not inclu	spouse i de inforr	s liv natio	ing with on abou	you, incl t your spe	ude info ouse. If r	rmation about more space is	ible for your needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	2 or non	-filing spouse	
	If you have more than one job,	Employment status	■ Employed				☐ Empl	oyed		
	attach a separate page with information about additional	Employment status	☐ Not employed				☐ Not e	mployed	l	
	employers.	Occupation	Truck Driver							
	Include part-time, seasonal, or self-employed work.	Employer's name	Self-employed							
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed the	here? Since F	ebruary	/ 20	17	_			
Par	t 2: Give Details About Mor	thly Income								
	mate monthly income as of the dause unless you are separated.	ate you file this form. If y	you have nothing to re	eport for a	any	line, write	e \$0 in the	space. I	nclude your no	n-filing
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	n for all e	mplo	oyers for	that perso	on on the	lines below. If	you need
						For Del	btor 1		ebtor 2 or iling spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly, or			2.	\$		0.00	\$	N/A	
3.	Estimate and list monthly overt	me pay.		3.	+\$		0.00	+\$_	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$		0.00	\$_	N/A	

Debte	or 1	Joseph Delano Hyman	_	Case	number (if known)	17-03820-5	-SWH	
				For	Debtor 1	For Debtor	2 or	
						non-filing		
	Cop	by line 4 here	4.	\$_	0.00	\$	N/A	-
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	-
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	-
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	\$	N/A	-
	5e.	Insurance	5e.	\$_	0.00	\$	N/A	_
	5f.	Domestic support obligations	5f.	\$_	0.00	\$	N/A	-
	5g. 5h.	Union dues Other deductions. Specify:	5g. 5h.+	\$_ \$	0.00	, <u>\$</u>	N/A N/A	-
•				Ψ_				-
		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	» —	0.00	\$	N/A	-
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	0.00	\$	N/A	-
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business,						
	oa.	profession, or farm						
		Attach a statement for each property and business showing gross						
		receipts, ordinary and necessary business expenses, and the total	0.0	\$	0.500.00	c	N1/A	
	8b.	monthly net income. Interest and dividends	8a. 8b.	\$ _	3,500.00	\$ \$	N/A N/A	-
	8c.	Family support payments that you, a non-filing spouse, or a dependent		Ψ_	0.00	Ψ	IN/A	-
		regularly receive						
		Include alimony, spousal support, child support, maintenance, divorce	0 -	Φ.		Φ.		
	8d.	settlement, and property settlement. Unemployment compensation	8c. 8d.	\$_ \$	0.00	\$	N/A N/A	-
	8e.	Social Security	8e.	\$ _	0.00	\$	N/A	-
	8f.	Other government assistance that you regularly receive	00.	Ψ_	0.00	<u> </u>	14/7	-
		Include cash assistance and the value (if known) of any non-cash assistance)					
		that you receive, such as food stamps (benefits under the Supplemental						
		Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	N/A	
	8g.	Pension or retirement income	8g.	\$_	0.00	\$	N/A	-
	8h.	Other monthly income. Specify: Contributions from finace	8h.+	\$	1,600.00	+ \$	N/A	-
_					_			7
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	5,100.00	\$	N/A	\
40	٠.	1. distribution	40 0		- 100 00 0		1 [- 400 00
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		5,100.00 + \$_	N/A	= \$ _	5,100.00
]	
11.		te all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your		donte	vour roommates	s and		
		er friends or relatives.	асрен	acrita	, your roominates	5, and		
		not include any amounts already included in lines 2-10 or amounts that are not	availab	le to p	oay expenses list			
	Spe	city:				11.	+\$	0.00
12	Δdd	I the amount in the last column of line 10 to the amount in line 11. The res	ult is th	e con	nhined monthly in	ncome		
		e that amount on the Summary of Schedules and Statistical Summary of Certa.				a, if it		E 400 00
	app	lies				12.	\$	5,100.00
							Combin	
40	D	valuarinata de increaca de desergo pristi in stra como esta constitui de la como	2				monthl	y income
13.		you expect an increase or decrease within the year after you file this form No.	ſ					
	_	Yes. Explain: Income varies.						
	-	l l						

Official Form 106I Schedule I: Your Income page 2

-	in this inform	nation to identify yo	ur caca:							
Deb	tor 1	Joseph Dela	no Hyma	ın		Cr		if this is: n amended filing		
Deb	tor 2						A	supplement show	ving postpetition chapter	
(Spo	ouse, if filing)						13	expenses as of t	the following date:	
Unit	ed States Ban	kruptcy Court for the	EASTE	RN DISTRICT OF NORTH	I CAROLINA		MI	M / DD / YYYY		
	e number	17-03820-5-SWI	1							
Of	fficial F	orm 106J								
Sc	chedul	e J: Your	Exper	ises					12 <i>/</i> -	15
Be info	as complete ormation. If	and accurate as	possible eded, atta	If two married people ar ch another sheet to this	e filing together, bo form. On the top of	oth are e	quall	y responsible fo al pages, write y	r supplying correct our name and case	
Pari	t 1: Desc	cribe Your House	hold							_
١.	■ No. Go									
	_	to line ∠. Des Debtor 2 live i	n a separ	ate household?						
			t file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	hold of D	ebtor	2.		
2.	Do you ha	ve dependents?	□ No							
	Do not list Debtor 2.	Debtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relation		_	Dependent's age	Does dependent live with you?	
	Do not stat	e the							■ No	
	dependent				Son			11	☐ Yes	
					Davabtas			42	■ No	
					Daughter			13	☐ Yes	
					Daughter			17	■ No □ Yes	
							_		□ No	
									☐ Yes	
3.		kpenses include of people other t	nan	No						
		nd your depende		Yes						
Par	t 2: Esti	mate Your Ongoi	ng Monthi	y Expenses						
exp		a date after the l		uptcy filing date unless y y is filed. If this is a supp						
the		ch assistance an		government assistance i cluded it on <i>Schedule I:</i>)				Your expe	enses	
(0		,								
4.		or home owners and any rent for the		ses for your residence. In root.	nclude first mortgage	4.	\$		550.00	
	If not inclu	ıded in line 4:								
	4a. Real	estate taxes				4a.	\$		0.00	
		erty, homeowner's				4b.	- 1		0.00	
		ie maintenance, re ieowner's associat				4c. 4d.	\$ -		0.00	
5.				oominium dues our residence, such as ho	me equity loans		\$ \$		0.00 0.00	
			_							

Debtor 1 Joseph Delano Hyman	Case number (if known)	17-03820-5-SWH
6. Utilities:		
6a. Electricity, heat, natural gas	6a. \$	160.00
6b. Water, sewer, garbage collection	6b. \$	40.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	356.00
6d. Other. Specify:	6d. \$	0.00
Food and housekeeping supplies	7. \$	400.00
. Childcare and children's education costs	8. \$	0.00
Clothing, laundry, and dry cleaning	9. \$	50.00
O. Personal care products and services	10. \$	20.00
Medical and dental expenses	11. \$	50.00
2. Transportation. Include gas, maintenance, bus or train fare.	12. \$	200.00
Do not include car payments.	·	
3. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	100.00
Charitable contributions and religious donations Insurance.	14. \$	160.00
Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a. \$	0.00
15b. Health insurance	15b. \$	350.00
15c. Vehicle insurance	15c. \$	92.00
15d. Other insurance. Specify:	15d. \$	0.00
5. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.	· · · · · ·	<u> </u>
Specify: Income (est)	16. \$	500.00
7. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a. \$	0.00
17b. Car payments for Vehicle 2	17b. \$	0.00
17c. Other. Specify:	17c. \$	0.00
17d. Other. Specify:	17d. \$	0.00
3. Your payments of alimony, maintenance, and support that you did not repo		1,365.00
deducted from your pay on line 5, Schedule I, Your Income (Official Form 10		
9. Other payments you make to support others who do not live with you.	\$	0.00
Specify:	19.	
 Other real property expenses not included in lines 4 or 5 of this form or on 20a. Mortgages on other property 	20a. \$	0.00
20b. Real estate taxes	20b. \$	0.00
20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
20e. Homeowner's association or condominium dues	20e. \$	0.00
	21. +\$	20.00
	+\$	24.00
Sirius radio	_	24.00
2. Calculate your monthly expenses		
22a. Add lines 4 through 21.	\$	4,437.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106	J-2 \$	_
22c. Add line 22a and 22b. The result is your monthly expenses.	\$	4,437.00
Coloulate very monthly not income		,
3. Calculate your monthly net income.	220 ¢	E 400 00
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	5,100.00
23b. Copy your monthly expenses from line 22c above.	23b\$	4,437.00
23c. Subtract your monthly expenses from your monthly income.	00.	662.00
The result is your monthly net income.	23c. \$	663.00
4. Do you expect an increase or decrease in your expenses within the year aft For example, do you expect to finish paying for your car loan within the year or do you expect modification to the terms of your mortgage?		crease or decrease because of a
□ No.	vo roflooto bio obace a	f avnancas
■ Yes. Explain here: The debtor lives with his fiance. The abo	ve reflects his shaer o	t expenses.

Fill in this inform	nation to identify your	case:			
Debtor 1	Joseph Delano H	yman			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	EASTERN DISTRICT OF	NORTH CAROLINA	<u> </u>	
Case number 1	17-03820-5-SWH				
(if known)					☐ Check if this is an amended filing
You must file this	s form whenever you f	n connection with a bank	or amended schedu	ıles. Making a false sta	tement, concealing property, or 00, or imprisonment for up to 20
Sign	Below				
Did you pay	or agree to pay some	one who is NOT an attorr	ney to help you fill o	ut bankruptcy forms?	
■ No					
☐ Yes. N	lame of person				nkruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
	ty of perjury, I declare true and correct.	that I have read the sumr	nary and schedules	filed with this declarati	ion and
X /s/ Jose	eph Delano Hyman		Х		
Joseph	Delano Hyman e of Debtor 1			e of Debtor 2	
Date A	August 15. 2017		Date		

		nation to identify your c			
De	btor 1	Joseph Delano Hy First Name	man Middle Name	Last Name	
De	btor 2	. not rains	dio raine	233.713.715	
(Sp	ouse if, filing)	First Name	Middle Name	Last Name	
Un	ited States Ban	kruptcy Court for the:	EASTERN DISTRICT OF NOI	RTH CAROLINA	
Ca	se number 1	7-03820-5-SWH			
(if k	nown)				☐ Check if this is an amended filing
Οſ	fficial For	rm 107			
			ffairs for Individua	als Filing for Bankruptcy	4/10
info nun	ormation. If months in the mon	ore space is needed, at). Answer every questi	tach a separate sheet to this	iling together, both are equally responsil form. On the top of any additional pages ed Before	
1.	What is your	current marital status?	?		
	☐ Married				
	■ Not marr	ried			
_	December of the Le	-10	dd d dd		
2.	During the la	ist 3 years, nave you liv	ed anywhere other than where	re you live now?	
	□ No				
	Yes. List	all of the places you live	ed in the last 3 years. Do not inc	clude where you live now.	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Address:	Dates Debtor 2 lived there
	1980 Sprin Garner, NC		From-To: October 2014-November 2016	☐ Same as Debtor 1	☐ Same as Debtor 1 From-To:
	79 Foglegle Clayton, N		From-To: April 2011-February 2014	☐ Same as Debtor 1	☐ Same as Debtor 1 From-To:
3. stat				quivalent in a community property state , New Mexico, Puerto Rico, Texas, Washin	- (), , ,
	■ No				
	_	ke sure you fill out Sched	dule H: Your Codebtors (Official	l Form 106H).	
Pa	rt 2 Explair	n the Sources of Your I	ncome		
·u	Explui	Time Courses of Tour I			
4.	Fill in the total	I amount of income you r	eceived from all jobs and all bu	business during this year or the two pre- usinesses, including part-time activities. gether, list it only once under Debtor 1.	vious calendar years?
	□ No				
	_	in the details.			
			Debtor 1	Debtor 2	
		L	CDIOI I	Deniul 2	

Official Form 107

Case 17-03820-5-SWH Doc 11 Filed 08/15/17 Entered 08/15/17 16:09:05 Page 31 of 46

Debtor 1 Joseph Delano Hyman Case number (if known) 17-03820-5-SWH

			Debtor 1		Debtor 2		
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inco	oply. (befor	s income re deductions xclusions)
	ary 1 of curre ou filed for bar		☐ Wages, commissions, bonuses, tips	\$34,701.00	☐ Wages, comr bonuses, tips	nissions,	
			Operating a business		☐ Operating a b	ousiness	
	lendar year: to December	31, 2016)	■ Wages, commissions, bonuses, tips	\$23,380.00	☐ Wages, comr bonuses, tips	nissions,	
			Operating a business		☐ Operating a b	ousiness	
	endar year be to December		☐ Wages, commissions, bonuses, tips	\$12,183.00	☐ Wages, comr bonuses, tips	nissions,	
			Operating a business		Operating a b	ousiness	
winning List eac	s. If you are fill	ing a joint cas	pensions; rental income; inter e and you have income that y me from each source separat	ou received together, list it o	only once under Del	btor 1.	ng and lottery
			Debtor 1		Debtor 2		
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inco	(befor	s income re deductions xclusions)
Part 3: L	ist Certain Pa	yments You	Made Before You Filed for I	Bankruptcy			
6. Are eitl □ No	D. Neither Do individual puring the No.	ebtor 1 nor D primarily for a 90 days befo Go to line 7 List below e paid that cre not include	s debts primarily consumer ebtor 2 has primarily consupersonal, family, or househol re you filed for bankruptcy, did ach creditor to whom you paid editor. Do not include payment payments to an attorney for the on 4/01/19 and every 3 years	Imer debts. Consumer debts d purpose." d you pay any creditor a tota d a total of \$6,425* or more into the for domestic support obligations bankruptcy case.	I of \$6,425* or more n one or more payr lations, such as chi	e? ments and the total a ild support and alimo	amount you
■ Ye			r both have primarily consure you filed for bankruptcy, did		I of \$600 or more?		
	□ No.	Go to line 7					
	■ Yes	List below e include pay	ach creditor to whom you paid ments for domestic support of this bankruptcy case.		•	•	
Credit	or's Name and	d Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this payment	for

46

Case number (if known) 17-03820-5-SWH

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	yment for
	Ord. payments to secured creditors	Monthly	\$0.00	\$0.00	☐ Mortgage ☐ Car ☐ Credit Ca ☐ Loan Rep ☐ Suppliers ☐ Other	ard payment
7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 17 alimony.	rtners; relatives of any ger control, or owner of 20% of	neral partners; partne or more of their voting	erships of which you	ou are a genera any managing a	al partner; corporations gent, including one fo
	No					
	☐ Yes. List all payments to an insider. Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cosi No Yes. List all payments to an insider		ments or transfer a	iny property on a	account of a de	ebt that benefited an
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment
Par	t 4: Identify Legal Actions, Repossession	s and Foreclosures	p.a			
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title	y, were you a party in a				t or custody
	Case number	Nature of the case	Court or agency		Otatus Or til	e case
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below ■ No. Go to line 11. □ Yes. Fill in the information below. Creditor Name and Address			oreclosed, garni Date		I, seized, or levied? Value of the property
44	Wishin 00 days before you filed for horsey					
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca No Yes. Fill in the details.		during a bank of the	ianciai institutio	ii, set oii aily a	imounts from your
	Creditor Name and Address	Describe the action the	e creditor took	Date take	action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or an No Yes		erty in the possessi			efit of creditors, a

Debtor 1 Joseph Delano Hyman

46

Deb	btor 1 Joseph Delano Hyman		Ca	ase number (<i>if kno</i>	own) 17-03820-	5-SWH
Par	t 5: List Certain Gifts and Contributi	ions				
13.	Within 2 years before you filed for bar ■ No □ Yes. Fill in the details for each gift.	nkruptcy, d	lid you give any gifts with a total valu	e of more than S	\$600 per person	?
	Gifts with a total value of more than \$ per person		Describe the gifts		ates you gave e gifts	Value
	Person to Whom You Gave the Gift a Address:	nd				
14.	Within 2 years before you filed for bar			s with a total val	ue of more than	\$600 to any charity?
	Yes. Fill in the details for each gift of					
	Gifts or contributions to charities tha more than \$600 Charity's Name Address (Number, Street, City, State and ZIP C		Describe what you contributed		ates you ontributed	Value
	Riley Hill Baptist Church 6101 Riley Hill Road Wendell, NC 27591		Money		hroughout rior 2 years	\$5,000.00
	■ No □ Yes. Fill in the details. Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the los the amount that insurance has paid. Lis ce claims on line 33 of Schedule A/B: F	st pending lo	ate of your ss	Value of property lost
Par	rt 7: List Certain Payments or Transf	ers				
16.		kruptcy, die or preparin	g a bankruptcy petition?			rty to anyone you
	Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if No	ot You	Description and value of any proper transferred	or	ate payment transfer was ade	Amount of payment
17.	Within 1 year before you filed for bank promised to help you deal with your c Do not include any payment or transfer to	reditors or	to make payments to your creditors		ansfer any prope	rty to anyone who
	No					
	Yes. Fill in the details.		Baradattan and t			
	Person Who Was Paid Address		Description and value of any proper transferred	or	ate payment transfer was ade	Amount of payment

Debtor 1 Joseph Delano Hyman

Case number (if known) 17-03820-5-SWH

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.					
	Person Who Received Transfer Address Person's relationship to you	Description and v property transferr		payme	ibe any property or ents received or debts n exchange	Date transfer was made
19.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-protein No Yes. Fill in the details.		y property to a	self-settle	d trust or similar device o	of which you are a
	Name of trust	Description and v	alue of the pro	perty trans	ferred	Date Transfer was made
Pai	t 8: List of Certain Financial Accounts, Inst	ruments, Safe Deposit	Boxes, and St	orage Unit	s	
 Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, crec houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. 						
		Last 4 digits of account number	Type of accounts instrument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ear before you filed for	bankruptcy, ar	ny safe dep	osit box or other deposi	tory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit or	place other than your	home within 1	year befor	e you filed for bankruptc	y?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	to it?	to it? Address (Number, Street, City,		the contents	Do you still have it?
Pai	t 9: Identify Property You Hold or Control for	or Someone Else				
23.	Do you hold or control any property that som for someone.	neone else owns? Inclu	ıde any proper	ty you borr	owed from, are storing f	or, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value
Pai	t 10: Give Details About Environmental Info	rmation				
For	the nurnose of Part 10, the following definition	ns anniv				

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

Debtor 1 Joseph Delano Hyman

Case number (if known) 17-03820-5-SWH

	toxic substances, wastes, or material into the a regulations controlling the cleanup of these sul		lwater, or other medium, including st	atutes or
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		aw, whether you now own, operate, o	or utilize it or used
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		waste, hazardous substance, toxic s	substance,
Rep	oort all notices, releases, and proceedings that yo	ou know about, regardless of wher	they occurred.	
24.	Has any governmental unit notified you that you	u may be liable or potentially liable	under or in violation of an environme	ental law?
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?		
	No No			
	Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or adminis	strative proceeding under any envi	ronmental law? Include settlements a	and orders.
	■ No □ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Pa	rt 11: Give Details About Your Business or Con	nections to Any Business		

■ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
■ A member of a limited liability company (LLC) or limited liability partnership (LLP)
☐ A partner in a partnership
An efficient director or managing executive of a connection

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

☐ An officer, director, or managing executive of a corporation

lacktriangle An owner of at least 5% of the voting or equity securities of a corporation

■ No. None of the above applies. Go to Part 12.

Yes. Check all that apply above and fill in the details below for each business.

Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
Hyman Transportation 542 Writers Way Morrisville, NC 27560	Trucking	EIN: From-To March 2013-present
Hyman Transportation, LLC Post Office Box 751 Clayton, NC 27528	Trucking	EIN: From-To March 17, 2015-February 2, 2017

Case 17-03820-5-SWH Doc 11 Filed 08/15/17 Entered 08/15/17 16:09:05 Page 36 of

Debtor 1 Joseph Delano Hyman

(Number, Street, City, State and ZIP Code)

Address

Case number (if known) 17-03820-5-SWH

28.	Within 2 years before you filed for bankrup institutions, creditors, or other parties.	tcy, did you give a financial statement to anyone about your business? Include all financial
	■ No □ Yes. Fill in the details below.	
	Namo	Data leguad

Official Form 107

Case 17-03820-5-SWH Doc 11 Filed 08/15/17 Entered 08/15/17 16:09:05 Page 37 of

46

Debtor 1 Joseph Delano Hyman Case number (if known) 17-03820-5-SWH

Part 1	2: Sign Below		
are tru with a	e and correct. I unde	rstand that making a false result in fines up to \$250,	I Affairs and any attachments, and I declare under penalty of perjury that the answers statement, concealing property, or obtaining money or property by fraud in connection 000, or imprisonment for up to 20 years, or both.
/s/ Jo	seph Delano Hym	an	
Jose	ph Delano Hyman		Signature of Debtor 2
Signa	ture of Debtor 1		
Date	August 15, 2017		Date
Did yo	u attach additional p	ages to Your Statement of	Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No			
☐ Yes			
Did yo	u pay or agree to pay	someone who is not an at	torney to help you fill out bankruptcy forms?
■ No			
☐ Yes	. Name of Person	. Attach the Bankruptcy F	etition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this information to identify your case:			
Debtor 1	Joseph Delano Hyman		
Debtor 2 (Spouse, if filing)			
United States Bankruptcy Court for the:		Eastern District of North Carolina	
Case number (if known)	17-03820-5-SWH		

Check	Check as directed in lines 17 and 21:							
1	According to the calculations required by this Statement:							
 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3). 								
	Disposable income is determined under 11 U.S.C. § 1325(b)(3).							
	3. The commitment period is 3 years.							
	4. The commitment period is 5 years.							

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part	rt 1: Calculate Your Average Monthly Income				
1.	What is your marital and filing status? Check one only.				
	■ Not married. Fill out Column A, lines 2-11.				
	☐ Married. Fill out both Columns A and B, lines 2-11.				
10 the	Fill in the average monthly income that you received from all sources, 101(10A). For example, if you are filing on September 15, the 6-month peric he 6 months, add the income for all 6 months and divide the total by 6. Fill spouses own the same rental property, put the income from that property in	od would be March 1 through Au in the result. Do not include any	igust 31. If the amo income amount m	ount of your monthly incomore than once. For examp	e varied during le, if both
		Colu Deb	ımn A tor 1	Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime, and con payroll deductions).	nmissions (before all \$	0.00	\$	
3.	Alimony and maintenance payments. Do not include paymen Column B is filled in.	ts from a spouse if \$	0.00	\$	
4.	All amounts from any source which are regularly paid for hof you or your dependents, including child support. Include from an unmarried partner, members of your household, your deand roommates. Include regular contributions from a spouse on filled in. Do not include payments you listed on line 3.	regular contributions ependents, parents,	0.00	\$	

5.	profession, or farm		Debtor 1						
	Gross receipts (before all deductions)	\$		12,10	4.83				
	Ordinary and necessary operating expenses	-\$		8,66	8.67				
	Net monthly income from a business, profession, or farm	\$		3,43	6.17	Copy here -> \$	3,436.17	\$_	
6.	Net income from rental and other real property		Debtor 1						
	Gross receipts (before all deductions)		\$	0.00					
	Ordinary and necessary operating expenses		-\$	0.00					
	Net monthly income from rental or other real proper	ty	\$	0.00	Copy	/ here -> \$ _	0.00	\$_	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

46

Debto	r1 _	Joseph Delano Hyman			Case number	(if known)	17-03820-	5-SWH
					Column A Debtor 1		Column B Debtor 2 or non-filing s	
7.	Intere	est, dividends, and royalties			\$	0.00	\$	
8.	Unen	nployment compensation			\$	0.00	\$	
	Do no the S	ot enter the amount if you contend that the amo ocial Security Act. Instead, list it here:	unt received was a bene	efit unde	r			
	Fo	you	\$ \$	0.00				
	Fo	your spouse	\$					
9.		ion or retirement income. Do not include any it under the Social Security Act.	amount received that w	as a	\$	0.00	\$	
10.	Do no received dome	ne from all other sources not listed above. So it include any benefits received under the Soci yed as a victim of a war crime, a crime against stic terrorism. If necessary, list other sources delow.	al Security Act or payme humanity, or internation	ents al or	\$	0.00	\$	
					\$	0.00	\$	
		Total amounts from separate pages, if any.		+	\$	0.00	\$	
11.		late your total average monthly income. Accolumn. Then add the total for Column A to the		\$	3,436.17	+ \$		\$ 3,436.17
12. 13.	Copy Calcu	your total average monthly income from linulate the marital adjustment. Check one:	ne 11.					\$3,436.17
		You are not married. Fill in 0 below.						
		You are married and your spouse is filing with	ou. Fill in 0 below.					
		You are married and your spouse is not filing w	ith you.					
		Fill in the amount of the income listed in line 11 dependents, such as payment of the spouse's						
		Below, specify the basis for excluding this incoadjustments on a separate page.	me and the amount of in	come de	evoted to each	purpose.	If necessary,	list additional
		f this adjustment does not apply, enter 0 below	' .					
				_ \$_		_		
				_ \$_		_		
				_ +\$ _				
		Total		\$_	0.00	Col	py here=>	0.00
14.	You	r current monthly income. Subtract line 13 f	rom line 12.					\$3,436.17
15.		culate your current monthly income for the	ear. Follow these steps	s:				2 426 47
	15a	Copy line 14 here=>						\$3,436.17
		Multiply line 15a by 12 (the number of month	s in a year).					x 12
	15b.	The result is your current monthly income fo	the year for this part of	the form	l			\$41,234.04

Case 17-03820-5-SWH Doc 11 Filed 08/15/17 Entered 08/15/17 16:09:05 Page 40 of

46

Debto	or 1	Joseph [Delano Hyman		Case number (if known)	17-03820-5-SWH	
16	. Cal	culate the r	nedian family income that applies to	ou. Follow these steps:			
	16a	. Fill in the s	state in which you live.	NC			
	161	Fill in the r	number of people in your household.	1			
			nedian family income for your state and			42. 9	946.00
	100	To find a li	st of applicable median income amounts	s, go online using the link		\$ <u></u> ,	
47	Ua		s for this form. This list may also be ava	lable at the bankruptcy c	elerk's office.		
17.		_	es compare?)	is farms abasis based. Discuss		-i
	17a		e 15b is less than or equal to line 16c. 0 U.S.C. § 1325(b)(3). Go to Part 3. Do N				iinea unaer
	17b	13.	the 15b is more than line 16c. On the top 25(b)(3). Go to Part 3 and fill out Calc our current monthly income from line 14 a	ulation of Your Disposa			
Part	t 3:	Calculat	te Your Commitment Period Under 11	U.S.C. § 1325(b)(4)			
18.	Co	y your tota	al average monthly income from line 1	1.		\$	3,436.17
19.	con	tend that ca	rital adjustment if it applies. If you are loulating the commitment period under 1 e, copy the amount from line 13.			pur	
	19a	. If the marit	al adjustment does not apply, fill in 0 on	line 19a.		- \$	0.00
	19b	. Subtract I	ine 19a from line 18.			\$\$	436.17
20.	Cal	culate your	current monthly income for the year	Follow these steps:		•	400 47
	20a	. Copy line	19b			\$ <u></u>	436.17
		Multiply by	12 (the number of months in a year).			x 12	
						. 44	
	20b	. The result	is your current monthly income for the y	ear for this part of the for	m	\$ 41,2	234.04
	20.	Convithor	median family income for your state and	aiza of haveahald from li	no 160	\$ 42,9	946.00
	200	. Copy the r	nedian family income for your state and	size of nousehold from in	ne roc	J — — — — — — — — — — — — — — — —	740.00
	21.	How do th	ne lines compare?				
		■ Line :	20b is less than line 20c. Unless otherwi	se ordered by the court	on the top of page 1 of this f	orm check box 3. <i>The co</i>	mmitment
			d is 3 years. Go to Part 4.	se ordered by the court, v	on the top of page 1 of this i	om, oneok box o, me ooi	Tillianone
			20b is more than or equal to line 20c. Un nitment period is 5 years. Go to Part 4.	less otherwise ordered b	by the court, on the top of pa	ge 1 of this form, check be	ox 4, <i>The</i>
Part	t 4:	Sign Be	low				
	Ву	signing here	, under penalty of perjury I declare that	he information on this sta	atement and in any attachmo	ents is true and correct.	
Х	(/s	/ Joseph D	Delano Hyman				
	Jo	seph Dela	ano Hyman				
		gnature of D e August					
	Dal	MM / DD	/				
	If y	ou checked	17a, do NOT fill out or file Form 122C-2				
	If y	ou checked	17b, fill out Form 122C-2 and file it with	his form. On line 39 of th	at form, copy your current n	nonthly income from line 1	4 above.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-03820-5-SWH Doc 11 Filed 08/15/17 Entered 08/15/17 16:09:05 Page 45 of

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of North Carolina

In re	Joseph Delano Hyman		Case No.	17-03820-5-SWH
		Debtor(s)	Chapter	13
	DISCLOSURE OF COMPENSATION	ON OF ATTORNE	Y FOR DE	BTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certi compensation paid to me within one year before the filing of the p be rendered on behalf of the debtor(s) in contemplation of or in co	etition in bankruptcy, or ag	reed to be paid t	to me, for services rendered or to
	For legal services (\$5,000) and filing fee reimbursement (\$31 reimbursement (\$25), I have agreed to accept	0) and credit counseling	\$	5,335.00
	Prior to the filing of this statement I have received		\$	0.00
	Balance Due		\$	5,335.00
2.	\$_310.00 of the filing fee has been paid.			
3.	The source of the compensation paid to me was:			
	✓ Debtor			
4.	The source of compensation to be paid to me is:			
	✓ Debtor ☐ Other (specify):			
5.	✓ I have not agreed to share the above-disclosed compensation v	vith any other person unless	they are memb	pers and associates of my law firm
	I have agreed to share the above-disclosed compensation with copy of the agreement, together with a list of the names of the	a person or persons who ar people sharing in the comp	e not members ensation is attac	or associates of my law firm. A ched.
6.	In return for the above-disclosed fee, I have agreed to render legal	service for all aspects of th	e bankruptcy ca	ase, including:
	 a. Analysis of the debtor's financial situation, and rendering advices. b. Preparation and filing of any petition, schedules, statement of a concentration of the debtor at the meeting of creditors and condent con	affairs and plan which may infirmation hearing, and any	be required; adjourned hear	
7.	By agreement with the debtor(s), the above-disclosed fee does not	include the following servi	ce:	
	CERT	FICATION		
	I certify that the foregoing is a complete statement of any agreeme bankruptcy proceeding.	nt or arrangement for paym	ent to me for re	epresentation of the debtor(s) in
	August 15, 2017	/s/ Travis Sasser		
_	Date	Travis Sasser		
		Signature of Attorney		
		Sasser Law Firm		
		2000 Regency Parkwa	у	
		Suite 230 Cary, NC 27518		
		919.319.7400 Fax: 919	9.657.7400	
		tsasser@carybankrup		
		Name of law firm	<u>,</u>	
		- J		

United States Bankruptcy Court Eastern District of North Carolina

In re	Joseph Delano Hyman			17-03820-5-SWH	
		Debtor(s)	Chapter	13	

VERIFICATION OF CREDITOR MATRIX

The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Signature of Attorney
Travis Sasser
Sasser Law Firm
2000 Regency Parkway
Suite 230
Cary, NC 27518
919.319.7400 Fax: 919.657.7400